•									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOF Effective October 1, 2003								10-753-923					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			20		•			RATE	FEE	7	RATE	FEE.	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC F	EE 385.0	OB	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		• 0			XS 9:		OR	YCAS	-	
INDEPENDENT CLAIMS			3 minus 3 =		• 0			X43=		OR	¥20	· ·	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT			. 🕕		+145=		OR			
* If the difference in column 1 is less than zero, enter "0" in column 2							ı	TOTAL	385	OR	<u> </u>		
\ \ CLAIMS AS AMENDED - PART II								. •	- <u> </u>	<u></u>	OTHER	THAN	
. ([2 5 05 (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR	SMALL		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONA FEE	- 1	RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total ·	. 18	Minus	- 2	0	-/		X\$ 9=		OR	X\$18=	•	
	Independent	· 3	Minus	ت	3	= /		X43=		OR	X86≠		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.146-	1	7	+290=		
5-10-06 (Column 1) (Column 2) (Column 3)								+145=		-IOR	TOTAL		
								ODIT. FE		_JOR	ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST									LADDI	7		4500	
AMENDMENT B		REMAINING AFTER . AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA	l	RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total	. 20	Minus	- /	20	= / '		X\$ 9=	. ,	OR	X\$18=		
	Independent	. 3	Minus	***	3	=/	I	X43=		OR	X86=	• /	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1./	OR	+290=	/,	
								TOTA DDIT. FE		OR	YOYAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)												/	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA	٦	RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	•	Minus	*		•		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	H	X43=	 	1	X86=		
٢]	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A79=		OR			
	I libro materials and	L	+145=	<u> </u>	OR	+290=							
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE OR ADDIT. FEE													
		mper Previously Pail ber Previously Pail					foun	id in the e	ppropriate b	ox in col	ນກາກ 1.		